

INFORMATION ABOUT LICENSING

PRIVATE PATROL OPERATOR AND PRIVATE PATROL OPERATOR QUALIFIED MANAGER

This packet contains information about obtaining a Private Patrol Operator license and a Private Patrol Operator Qualified Manager certificate, descriptions of required qualifications, and license application forms. It is the policy of the Bureau of Security and Investigative Services (Bureau) to provide equal licensing opportunities for all persons without regard to race, color, religion, sex, national origin, disability, age, creed, marital status or sexual orientation.

The Bureau licenses and regulates Private Patrol Operators in California under the provisions of the:

- California Business and Professions Code 7580-7588.5
- California Code of Regulations (formerly California Administrative Code)
Title 16, Division 7, sections 600.1 – 645

No person may engage in the business of a Private Patrol Operator in California without obtaining the proper license from this Bureau. Any person who operates without a license, unless exempted, or who represents himself or herself to be licensed and is not licensed, is guilty of a misdemeanor, which is punishable by a fine and/or imprisonment. Licensing laws and regulations are subject to change. Applicants are responsible for staying informed of legislative or regulatory changes which may affect the status of their application. If any such changes affect the status of an application after it has been filed with the Bureau, the applicant will be notified.

GENERAL QUALIFICATIONS FOR LICENSURE

Each person listed on the application (owner, partner, corporate officer, qualified manager) is required to meet certain general qualifications regarding fitness for licensure.

The person who will be in active charge of the business for a Private Patrol Operator is referred to as the qualified manager. Each company license must have one person designated as the qualified manager and that person must meet the general license qualifications, as well as more specific qualifications regarding age, experience and examination. The qualified manager may be an owner, partner, corporate officer or any other person meeting the requirements for a qualified manager.

DENIAL OF LICENSURE

A criminal history check is made on all applicants through the completion of a Department of Justice (DOJ) and Federal Bureau of Investigation (FBI) Live Scan. The director may deny a license if any person listed on the application as an owner, partner, corporate officer or qualified manager have done any of the following:

- Been convicted of a crime. Any conviction of any crime or plea of nolo contendere, even if the conviction was dismissed under Penal Code section 1203.4, must be disclosed on the application.
- Committed any act involving dishonesty, fraud or deceit with the intent to substantially benefit himself or herself, or injure another.
- Committed any act which, if done by a licensee of the business or profession in question, would be grounds for suspension or revocation of the license.
- Knowingly made a false statement of fact required to be revealed on the license application.
- Had a license which is under suspension.
- Been refused a license or had a license revoked, or been an owner, partner, corporate officer or qualified manager of any business that has been refused a license or had a license revoked by the Bureau.

- While unlicensed, committed, or aided and abetted the commission of, any act for which said license is required.

If a denial of licensure is based on a previous criminal act by the applicant, the crime or act must be substantially related to the qualifications, functions or duties of the business or profession for which the application is made.

GENERAL REQUIREMENTS – QUALIFIED MANAGER

The person who is designated as the qualified manager must meet these general requirements in addition to the experience requirement listed below:

- Be at least 18 years of age.
- Attain a passing score on the written examination.
- Have at least one year of compensated experience totaling not less than **2,000** hours as a patrolman, guard or watchman, or the equivalent thereof.

Note: If an applicant has previously passed the examination for a Private Patrol Operator Qualified Manager and/or currently holds a valid license, the applicant does not have to retake the exam.

APPLICATION PROCESSING TIMEFRAME

The following items may affect the time required to process your application: incomplete application forms; incorrect or nonpayment of fees; passing the examination; the DOJ and FBI's response time on criminal history checks; and the time required to verify application information.

All applications are processed on a first-come, first-serve basis. Please allow a minimum of four weeks before contacting the Bureau regarding the status of an application.

FORMS REQUIRED FOR LICENSE APPLICATION

The following is a description of each type of form that must be included with your application. All required forms must be completed and submitted to the Bureau with the appropriate fees before the application will be processed. If "fee required" appears by the form number, see the attached Private Patrol Operator Schedule of Fees for the amount. The attached Private Patrol Operator Application Forms Checklist on page 6 also lists the forms required for a Private Patrol Operator license. Please check the completed application package against this list before submitting it to the Bureau.

Application for License (Form 31A-4) (fee required)

A separate Private Patrol Operator application must be filed for each entity applying for a license. For example, if a Private Patrol Operator sole owner wants to have a partnership with someone else, the sole owner must file two separate Private Patrol Operator applications.

Licenses are not transferable or assignable to new entities, and a change in ownership constitutes a new entity, with a newly assigned Private Patrol Operator license number.

If the type of ownership/entity is changed after filing an application or after becoming licensed, a new application must be submitted with the appropriate fees. For example, if a licensed sole owner later decides to form a partnership or corporation, the sole owner must apply for a new license to do business as a partnership or corporation.

Note: If applying for a Private Patrol Operator Qualified Manager license only, there is no need to complete the Application for License (Form 31A-4).

Business address: A post office box or mailbox service may not be used as the address of record unless mail delivery to the physical location of the business is not possible or the principal place of business is located in the applicant/licensee's personal residence. If a post office box or mailbox service is listed as the business address, the licensee should provide an explanation for doing so with the application and provide the actual physical location/address of the business in the accompanying explanation.

Personal Identification Form (Form 31A-9) (no fee required)

Each person listed on the Private Patrol Operator Application for License as an owner, partner, corporate officer and/or qualified manager of the business must complete one of these forms and submit two passport quality photographs, taken within the past year. Any person who knowingly falsifies photographs required for licensure is guilty of a felony.

If the applicant has ever been convicted of a crime, it must be disclosed on this form along with an explanation of the circumstances. Conviction(s) dismissed under Penal Code section 1203.4 or a plea of nolo contendere must be disclosed.

Qualifying Experience Form (Form 31A-8) (no fee required)

This form must be completed for persons applying for examination as a qualified manager for a Private Patrol Operator license. **All qualifying experience for the Qualified Manager must be certified on this form by someone other than the applicant.** A separate form is to be used by each person who is certifying experience and for each employer. All military qualifying experience must be supported by a copy of the applicant's DD-214 or Performance Evaluation Report. Additional support of experience may be required as requested by the Bureau. One year of experience is equivalent to a minimum of 2,000 hours of compensated time in the required field.

Request for Authorization of Business Name (Form 31A-12) (no fee required)

Business may not be conducted under a fictitious or other business name unless written authorization is received from the Bureau.

The Bureau recommends that applicant's wait until the issuance of a Private Patrol Operator license before incurring expenses related to the use of the name, e.g., stationery, business cards, advertising, telephone listings, etc. for the Private Patrol Operator Company. **Approval of a corporate name by the Secretary of State does not mean the name will be automatically approved as a business name by the Bureau.**

The Request for Authorization of Business Name form will not be processed before receipt of an application and fees. List business names to be considered in order of preference. Name approval or disapproval is not available by telephone. Applicants who have already passed the required examination will be notified of name approval or disapproval after review and acceptance of the application. New applicants will be advised of name approval or disapproval with notification of passing the written examination.

Note: If applying for a Private Patrol Operator Qualified Manager license only, there is no need to complete the Request for Authorization of Business Name (Form 31A-12).

Branch Office Registration Application (Form 31A-11) (fee required)

This form is required only if the applicant/licensee intends to conduct business from a location other than the principal place of business. A separate form is required for each branch location. If the applicant/licensee intends to have branch offices, the Private Patrol Operator Branch Office Registration Application form should be completed and submitted to the Bureau. It can be downloaded from the Bureau's website at

<http://www.bsis.ca.gov>.

Fingerprint Cards are Rarely Acceptable

CALIFORNIA RESIDENTS: Effective July 1, 2005, the Department of Justice, with rare exceptions, will only accept electronically submitted (Live Scan) fingerprints for criminal background checks related to employment, licensing, certification, etc.

Applicants who do not have reasonable access to Live Scan or have a justifiable reason to submit their fingerprints on a fingerprint card may apply for an exemption. Submit a "Request for Exemption from Mandatory Electronic Fingerprint Submission Requirement" form with the application and a fingerprint card. This form is available at <http://ag.ca.gov/fingerprints/pdf/bcii9004.pdf>.

To ensure timely processing of applications, as of June 1, 2005, the Bureau will accept fingerprint cards from California applicants only if they qualify for the exemption mentioned above.

NON-RESIDENTS: Out-of-state applicants will be deemed to lack reasonable access to Live Scan. Accordingly, hard fingerprint cards for such individuals will not be subject to the limitations described above.

Live Scan Sites and Forms

Live Scan is a system for the electronic submission of fingerprints and the subsequent automated background checks and responses. Simply go to the nearest Live Scan station to submit fingerprints to the DOJ and FBI. Pay the Live Scan Operator the \$32.00 DOJ fingerprint processing fee and the \$17.00 FBI fingerprint processing fee. Additional rolling fees may apply. Visit the Bureau's website at <http://www.bsis.ca.gov> to find the link to the Live Scan sites and/or Live Scan form.

Disclaimer: Please request the Live Scan operator to include your social security number when keying your information in order to aid the Bureau in processing your application.

REQUIRED FOR LICENSE APPLICATION

Corporate Applicants Only

If a corporate application is filed and the Articles of Incorporation or the Statement and Designation as a Foreign Corporation are already filed with the California Secretary of State; a copy of the **endorsed** articles should accompany the application. Endorsed Articles of Incorporation or the Statement and Designation as a Foreign Corporation are required before a corporate license is issued.

QUALIFIED MANAGER EXAMINATION

Examinations are designed to determine proficiency of the applicant to engage in the business of a Private Patrol Operator, as a Qualified Manager.

In order to be considered for examination, the Bureau must receive the completed application and appropriate fee(s).

After the application is approved, the applicant's name and address will be sent to Psychological Services Industry (PSI). PSI will mail the applicant a candidate handbook and study materials. Upon receipt of this information the applicant may contact PSI at the phone number provided in the handbook and schedule the date, time and location for examination.

Disclaimer: Successfully passing the Private Patrol Operator examination does not guarantee that an applicant will be issued a Private Patrol Operator license from the Bureau.

Examinees requiring special testing arrangements due to a physical or mental impairment must submit a request to the Bureau for such arrangements. This request must be in writing and include supporting documentation from a physician or other qualified professional.

RE-EXAMINATION

If the applicant does not pass the Private Patrol Operator exam, or is unable to attend the scheduled exam date, the applicant may apply to sit for the exam at a later date by submitting a written request or an application for re-examination (form is attached to the results notice) and the appropriate fee. The applicant will receive the candidate handbook and study materials from PSI. Once this information is received, the applicant may schedule an appointment with PSI to take the exam.

ADDITIONAL REQUIREMENTS

Private Patrol Operator – Insurance Requirement

All Private Patrol Operators who employ security guards who carry a firearm as part of their duties must maintain an insurance policy which provides minimum limits of insurance of \$500,000 for any one loss due to bodily injury or death and \$500,000 for any one loss due to injury or destruction of property. After the applicant's license is issued, the policy must be available for review upon request by the Bureau.

ABANDONMENT OF APPLICATIONS

If the applicant does not complete the license application process within one year after filing the application with the Bureau, or if does not pass the examination within a one-year period after becoming eligible, the application will be considered abandoned. The date the application will be considered abandoned is included in the applicant's examination scheduling letter. Once the application is considered abandoned, the applicant will be required to submit a new Live Scan form, a new application and appropriate fees.

FINAL STEPS IN THE LICENSING PROCESS

When all requirements are met for licensing, including the requirements for the qualified manager, the applicant will be notified to send the following items:

- License fee, if not already paid (see Private Patrol Operator Schedule of Fees).
- Any additional information needed to complete the application.
- **For Applicants Who Applied As A Corporation:** Articles of Incorporation or Statement and Designation as a Foreign Corporation from the California Secretary of State, if not already submitted.

LICENSE RENEWAL

After a license is issued; it is subject to renewal as prescribed by law. The expiration date is shown on the licensee's license. If the licensee does not renew the license on time, delinquent penalties and reinstatement timeframes apply as prescribed by law. The Bureau will send an application for renewal before the license expiration date; however, it is the licensee's responsibility to renew his or her Private Patrol Operator license on time.

Applicants looking to renew their additional fictitious business name (AKA) license should submit a written request to the Bureau, along with a \$10.00 processing fee for the issuance of each replacement wall license, and an additional \$10.00 processing fee for the issuance of each replacement pocket license.

ANY QUESTIONS?

If you have questions regarding the Private Patrol Operator licensing process or about completion of your application, you may contact the Bureau at:

Bureau of Security and Investigative Services
P.O. Box 989002
West Sacramento, CA 95798-9002
(800) 952-5210
(916) 322-4000

Although every effort has been made to assure the accuracy of this information packet, it does not have the force and effect of law, rule or regulation. Should any difference or error occur, the law will take precedence.

PRIVATE PATROL OPERATOR AND PRIVATE PATROL OPERATOR QUALIFIED MANAGER APPLICATION FORMS CHECKLIST

This form is for your use only. Please do not submit it to the Bureau with your application. Your application package must include each form listed below, along with the correct fees.

APPLICATION AND FINGERPRINT PROCESSING FEES ARE NON-REFUNDABLE.

Check off each form that you have completed. If there is a fee requirement, find the amount on the Private Patrol Operator Schedule of Fees and write it on the checklist. When all forms are checked off, submit your application package and appropriate fees to the Bureau. Make checks payable to the Bureau of Security and Investigative Services.

PRIVATE PATROL OPERATOR

If you do not have a qualified manager who already has a current qualification certificate, you must also send the forms listed for the qualified manager. If you are applying only to become certified as a private patrol operator qualified manager, do not complete these forms – see forms list for qualified manager.

- | | |
|---|--|
| <input type="checkbox"/> Application for License (Form 31A-4) | Application Processing Fee/
Examination Fee: <u>\$ 500.00</u> |
| <input type="checkbox"/> Personal Identification Form (Form 31A-9)
One form and two passport quality photographs, taken within the past year, for <u>each</u> owner, partner, corporate officer and manager. | License Fee (Fee payable after the exam is passed): <u>\$ 700.00</u> |
| <input type="checkbox"/> Second copy of the Live Scan form signed by the Live Scan operator, for <u>each</u> owner, partner, corporate officer and qualified manager. | |
| <input type="checkbox"/> Request for Authorization of Business Name (Form 31A-12) | |
| <input type="checkbox"/> Corporation Applicants Only: endorsed Articles of Incorporation or the Statement and Designation by a Foreign Corporation <i>if already filed</i> with the California Secretary of State. | |
| <input type="checkbox"/> Partnership Applicants Only: include your Federal Employee Identification Number (FEIN) on page 8 of your application packet. | |

QUALIFIED MANAGER ONLY

- | | |
|---|--|
| <input type="checkbox"/> Personal Identification Form (Form 31A-9)
One form and two passport quality photographs, taken within the past year, for <u>each</u> owner, partner, corporate officer and manager. | Examination Fee (Payable if only taking the Qualified Manager exam):
<u>\$ 500.00</u> |
| <input type="checkbox"/> Second copy of the Live Scan form signed by the Live Scan operator. | |
| <input type="checkbox"/> Qualifying Experience (Form 31A-8)
One form from each person who is certifying the required work experience. | |

**BUREAU OF SECURITY AND INVESTIGATIVE SERVICES**

Post Office Box 989002

West Sacramento, CA 95798-9002

(916) 322-4000 (800)952-5210

www.bsis.ca.gov

**PRIVATE PATROL OPERATOR
APPLICATION FOR LICENSE****If you are a Veteran of the United States military, please check here.** ☐

This information is requested pursuant to California Business and Professions Code section 7582 and 7582.7 and will be used to determine eligibility for licensure. All information is necessary and if not provided, the application may be rejected. You must submit the application/licensing fee(s) with your application package. Failure to do so may delay the processing of your application. **Please note that the application processing fee/examination fee and/or license fees are non-refundable.**

If the qualified manager has already passed the Bureau examination and is still eligible to be a qualified manager, you may submit the application processing fee and the exam fee with this application.

Department Use Only

Prefix _____

No. _____

Iss. _____

Exp. _____

PLEASE TYPE OR PRINT CLEARLY.

1. Proposed Business Name _____

2. Business Address – Number and Street _____

City _____

State _____

Zip Code _____

3. Qualified Manager's Full Name _____

4. Qualified Manager License Number (if licensed) _____

5. Telephone – Business _____

Residence _____

()

()

6. Type of Business Organization

☐

Individual

☐

Partnership

☐

Corporation

/ / / - / / - / / / /

/ / / - / / - / / / /

/ / / - / / - / / / /

Social Security No. (Individual Ownership Only)

FEIN (Partnership Ownership Only)

Corporate Number (Corporation Only)

List the name of each owner, partner, or corporate officer of the business and identify their position. For corporations list chief executive officer, secretary, chief financial officer, and any other corporate officer who will be active in the business. If additional space is needed, attach a separate sheet.

Name – Last

First

Middle

Position

Telephone

()

()

()

Each person listed in items 3 and 6 must complete and submit a Private Patrol Operator Personal Identification Form (Form 31A-9), even though the person may have previously submitted this information in connection with another license.

7. Are you a Veteran of the United States military? ☐ YES ☐ NOIf yes, were you honorably discharged? ☐ YES ☐ NO**Please include a copy of your DD-214 form as proof of your qualifying experience.**

I/We declare under penalty of perjury, under the laws of the State of California, that all information contained on this Application for License and any accompanying documents is true and correct, with full knowledge that all statements made in this form are subject to investigation and that ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF LICENSE.

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

SIGNATURES REQUIRED: Individuals whose names appear in item 3 and 6. Per California Civil Code, section 1798 (Information Practices Act), the chief of the Bureau is responsible for maintaining the information in this application. This information may be transferred to other governmental and enforcement agencies. Individuals have the right to review the records maintained on them by the agencies, unless the records are exempt by California Civil Code section 1798.40.

31A-4 (Rev. 03/2013)

BUREAU OF SECURITY AND INVESTIGATIVE SERVICES

P.O. Box 989002

West Sacramento, CA 95798-9002

(916) 322-4000 (800)952-5210

www.bsis.ca.gov



**PERSONAL IDENTIFICATION FORM
PRIVATE PATROL OPERATOR, PRINCIPALS, CORPORATE OFFICERS,
AND PRIVATE PATROL OPERATOR QUALIFIED MANAGER**

Each person listed on the Private Patrol Operator Application for License (Form 31A-4) as an owner, partner, corporate officer, and qualified manager of the business must complete and submit this form. This form is also to be completed for any change in corporate officer or qualified manager after the license is issued. A corporate officer includes the chief executive officer, secretary, chief financial officer and any other officer who will be active in the business.

This form must be accompanied by a Live Scan form signed by the Live Scan operator, and two passport quality photographs, taken within the past year.

Disclosure of your social security number is mandatory. California Business and Professions Code section 30 Public Law 94-455 [42 USCA 405(c)(2)(C)] authorizes collection of your social security number. Your social security number will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with Family Code section 17520, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your social security number, you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.

This information is requested pursuant to California Business and Professions Code sections 480, 7582.6, 7582.19 and Labor Code section 432.7 and will be used to determine eligibility for licensure. All information is necessary, and if not provided, the application may be rejected.

DEPARTMENT USE ONLY	
Prefix	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
No.	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
Iss	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
Exp	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>

PLEASE TYPE OR PRINT CLEARLY.

1. This application is for a: <input type="checkbox"/> Private Patrol Operator License <input type="checkbox"/> Private Patrol Operator Qualified Manager		2. A change in an existing license: <input type="checkbox"/> Corporate Officer <input type="checkbox"/> Qualified Manager <input type="checkbox"/> Other _____		3. Name of Qualified Manager (Please Print) _____	
4. Business Name				5. License Number (if licensed)	
6. Full Name Last		First		Middle	
7. Social Security Number (Mandatory)					
8. Residence Address – Number and Street		City		State Zip Code	
9. Telephone Number Residence () Business ()		10. E-mail Address		11. Date of Birth (Mo/Day/Yr)	
12. YOUR POSITION WITH BUSINESS: (Check all that apply)					
<input type="checkbox"/> OWNER		<input type="checkbox"/> QUALIFIED MANAGER			
<input type="checkbox"/> PARTNER		<input type="checkbox"/> OFFICER		OFFICE HELD _____	
13. Have you ever applied for or received a license or registration from the Department of Consumer Affairs, the Department of Professional and Vocational Standards, Bureau of Private Investigators and Adjusters, the Collection Agency Licensing Bureau, the Bureau of Collection and Investigative Services, or the Bureau of Security and Investigative Services?				YES <input type="checkbox"/> NO <input type="checkbox"/>	
14. Have you or any partnership or corporation of which you were a member or officer had any license denied, suspended or revoked by any state, territory, or governmental agency?				YES <input type="checkbox"/> NO <input type="checkbox"/>	
15. Have you ever been convicted of any crime, or entered a plea of nolo contendere? This includes all offenses, misdemeanors, and felonies in any state, federal jurisdiction, and foreign country, including convictions entered after a plea of nolo contendere (no contest). Convictions dismissed under Penal Code section 1203.4 MUST also be disclosed. However, you need not disclose crimes excluded by the provisions of Penal Code section 19.8.				YES <input type="checkbox"/> NO <input type="checkbox"/>	
16. Have you ever used a name other than your present legal name?				YES <input type="checkbox"/> NO <input type="checkbox"/>	

IMPORTANT: If you answered "YES" to any of the preceding questions, attach a supplementary statement giving a complete and detailed explanation, including dates, names used, license numbers, reasons, convictions, etc.

17. EMPLOYMENT HISTORY: Your past five-year employment history must be shown. List most recent experience first. Qualified managers must list one year of qualifying experience and attach their completed Qualifying Experience forms for any experience used to qualify for the license examination. If additional space is needed, attach a separate sheet.

NAME OF EMPLOYER		TELEPHONE NUMBER ()	DUTIES PERFORMED:
ADDRESS: NUMBER STREET CITY STATE ZIP CODE			
YOUR POSITION TITLE	SUPERVISOR'S NAME		
DATES EMPLOYED (Month/Day/Year) From: To:		TOTAL NUMBER OF HOURS WORKED	
NAME OF EMPLOYER		TELEPHONE NUMBER ()	DUTIES PERFORMED:
ADDRESS: NUMBER STREET CITY STATE ZIP CODE			
YOUR POSITION TITLE	SUPERVISOR'S NAME		
DATES EMPLOYED (Month/Day/Year) From: To:		TOTAL NUMBER OF HOURS WORKED	
NAME OF EMPLOYER		TELEPHONE NUMBER ()	DUTIES PERFORMED:
ADDRESS: NUMBER STREET CITY STATE ZIP CODE			
YOUR POSITION TITLE	SUPERVISOR'S NAME		
DATES EMPLOYED (Month/Day/Year) From: To:		TOTAL NUMBER OF HOURS WORKED	

18. List your residence addresses for the past five years. Give the most recent first, using additional sheet if necessary.

NUMBER AND STREET CITY STATE ZIP CODE	FROM	TO

ATTENTION – READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS FORM

I declare under penalty of perjury, under the laws of the State of California, that all information contained on this Personal Identification Form and any accompanying documents is true and correct, with full knowledge that all statements made in this application are subject to investigation and that any false or dishonest answer to any question may be grounds for denial or subsequent revocation of license.

SIGNATURE

DATE

Per California Civil Code section 1798.17 (Information Practices Act), the chief of the Bureau is responsible for maintaining the information in this application. This information may be transferred to other governmental and enforcement agencies. Individuals have the right to review the records maintained on them by the agencies, unless the records are exempt by California Civil Code section 1798.40.

**Attach two passport
quality photographs, taken
within the past year**

DEPARTMENT USE ONLY

EXP _____

FP 1 _____

FP 2 _____

BUREAU OF SECURITY AND INVESTIGATIVE SERVICES

P.O. Box 989002

West Sacramento, CA 95798-9002

(916) 322-4000 (800)952-5210

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PRIVATE PATROL OPERATOR REQUEST FOR AUTHORIZATION OF BUSINESS NAME

Any name under which you intend to do business, including your own name, must be submitted to the Bureau for approval pursuant to California Business and Professions Code section 7582.17. A Request for Authorization of Business Name form will not be accepted prior to application for license. Business may not be conducted under a fictitious or other business name unless written authorization is received from the Bureau. Any advertisement must contain the *exact* business name as approved by the Bureau. The use of a fictitious business name is subject to the provisions of California Business and Professions Code Chapter 5 (commencing with section 17900) of Part 3 of Division 7. This Chapter defines fictitious name and contains provisions regarding use and requirement for filing a statement with the local county clerk.

Private Patrol Operator: Business and Professions Code section 7582.17 states in part:

The Bureau shall not authorize the use of a fictitious or other business name which is so similar to that of a public office or agency of that used by another licensee that the public may be confused or misled thereby.

* The Bureau must maintain a physical address of record on file at all times. If mail delivery to the physical location of the business is not possible, please list a mailing address in addition to the physical business address. If you are operating out of your residence and wish to keep your physical address confidential from public record, please submit a written request and attach it with this form.

1. Name of Qualified Manager _____

2. *Physical Business Address – Number and Street _____

City _____

State _____

Zip Code _____

3. *Mailing Address (If applicable) _____

City _____

State _____

Zip Code _____

4. Telephone Number _____

Residence () _____

Business () _____

5. List proposed business names in the order of preference. At least three choices should be provided if a fictitious name is requested; however, five choices are preferable. If the first name listed is approved, additional names will not be considered. Other criteria for name approval:

- If initials are to be used as part of the name, you must explain what they stand for.
- The use of the following words will not be approved for an individual or partnership license: Corporation, Corp., Incorporated, Inc.
- The following words or initials will not be approved as part of a fictitious or business name: U.S., United States, Federal, State, Bureau, Police, Task Force, Community, County.

1. _____

2. _____

3. _____

4. _____

5. _____

Department Use Only

Approved

Disapproved

6. CERTIFICATION:

If type of license is individual, the owner must sign.

If type of license is a partnership, all partners must sign.

If type of license is a corporation, a responsible corporate officer must sign.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature _____ Title _____ Date _____

Signature _____ Title _____ Date _____

Signature _____ Title _____ Date _____

Signature _____ Title _____ Date _____



ADDITIONAL COMMENTS:

[illegible]

The undersigned hereby declares under penalty of perjury, under the laws of the State of California, that all statements contained herein are true and correct.

DATE _____



BUREAU OF SECURITY AND INVESTIGATIVE SERVICES

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West Sacramento, CA 95798-9002
(916) 322-4000 (800)952-5210
www.bsis.ca.gov



INFORMATION COLLECTION, ACCESS AND DISCLOSURE

The information you provide on this application is maintained by the Chief of the Bureau of Security and Investigative Services, Department of Consumer Affairs, 2420 Del Paso Road., Suite 270, Sacramento, CA 95834, (916) 322-4000. The information is requested pursuant to California Business and Professions Code sections 7580 – 7588.5, and California Labor Code section 432.7; and/or Title 16, California Code of Regulation section 606.

It is mandatory that you provide all information requested. Omission of any item of required information will result in the application being rejected as incomplete.

Disclosure of your social security number is mandatory. California Business and Professions Code section 30 and Public Law 94-455[42 USCA §405(c)(2)(C)] authorize collection of your social security number. Your social security number will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with Family Code section 17520, or for verification of licensure or examination status by a licensing or examination entity which uses a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your social security number, you will be reported to the Franchise Tax Board, which may assess a \$100.00 penalty against you.

Your completed application becomes the property of the Bureau and will be used by authorized personnel to determine your eligibility for a license, registration or permit. Information on your application may be transferred to other governmental or law enforcement agencies. Pursuant to the California Public Records Act (Gov. Code section 6250 et seq.) and the Information Practices Act (Civil Code section 1798.61), the names and addresses of persons possessing a license or registration may be disclosed by the department unless otherwise specifically exempt from disclosure under the law. **Consequently, the personal name and address information entered on the attached form(s) may become public information subject to disclosure.**

You have the right to review the records maintained on you by the Bureau or department unless the records are exempt by California Civil Code section 1798.40. You may gain access to the information by contacting the Bureau at the above address.

The Unruh Civil Rights Act and other state laws contain prohibitions against gender-based pricing practices. Prices must be based on factors such as the difficulty of treatment or service, and not on the gender of the customer. Violators of these laws may be required to pay damages of a minimum of \$1,000.00 for each violation as specified in California Civil Code section 52. [Statutes 1994, chapter 535 (SB 1288)].

(Rev. 03/2013)

BUREAU OF SECURITY AND INVESTIGATIVE SERVICES

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PRIVATE PATROL OPERATOR AND PRIVATE PATROL OPERATOR QUALIFIED MANAGER SCHEDULE OF FEES

Fingerprint processing fees are set by the Department of Justice (DOJ) and Federal Bureau of Investigation (FBI).

APPLICATION AND FINGERPRINT PROCESSING FEES ARE NON-REFUNDABLE

Application Processing/Examination Fee	\$500
DOJ Fingerprint Processing Fee (\$32.00 paid at Live Scan site)	
FBI Fingerprint Processing Fee (\$17.00 paid at Live Scan site)	
TOTAL	\$500
License Fee (Fee payable after you have passed exam)	\$700
Renewal Fee (Fee payable every two years)	\$700
Additional Delinquent Fee (postmarked 30 days after expiration date)	\$350
Re-examination Fee	\$40
Company Name Change or Adding a Fictitious Business Name (AKA) License	\$25
Fictitious Business Name (AKA) Wall Replacement License	\$10
Fictitious Business Name (AKA) Pocket Replacement License	\$10
<u>PRIVATE PATROL OPERATOR BRANCH OFFICE</u>	
Application Fee	\$250
Renewal Fee	\$75
Additional Delinquent Fee (postmarked 30 days after expiration date)	\$37.50

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